

48-HOUR NOTICE OF CONTRIBUTIONS/LOANS RECEIVED

(See Reverse Side for Instructions)

To be used to report all contributions (including loans) of \$1000 or more, received within 20 days of the election.

1. NAME OF COMMITTEE IN FULL Pete Stauber for Congress																					
ADDRESS (number and street) 23 Central Entrance Box 333																					
CITY Duluth	STATE MN	ZIP CODE 55811																			
2. NAME OF CANDIDATE Stauber, Peter, Allen, ,		3. OFFICE SOUGHT (State and District) House MN 08																			
4. FEC IDENTIFICATION NUMBER C00650697																					
5. IS THIS AN AMENDMENT? <input checked="" type="checkbox"/> NO, THIS IS A NEW FILING <input type="checkbox"/> YES, IT AMENDS THE NOTICE FILED ON _____ / _____ / _____																					
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td colspan="3" style="padding: 5px;"> A. FULL NAME Electing Majority Making Effective Republicans PAC </td> <td style="padding: 5px;"> Name of Employer </td> <td style="padding: 5px;"> Date (month, day, year) </td> <td style="padding: 5px;"> Amount </td> </tr> <tr> <td colspan="3" style="padding: 5px;"> MAILING ADDRESS PO Box 183 </td> <td style="padding: 5px;"> Transaction ID : F65-CN4537 </td> <td style="padding: 5px;"> 08/10/2018 </td> <td style="padding: 5px;"> 2000.00 </td> </tr> <tr> <td style="padding: 5px;"> CITY Anoka </td> <td style="padding: 5px;"> STATE MN </td> <td style="padding: 5px;"> ZIP CODE 55303 </td> <td colspan="3" style="padding: 5px;"> Occupation </td> </tr> </table>				A. FULL NAME Electing Majority Making Effective Republicans PAC			Name of Employer	Date (month, day, year)	Amount	MAILING ADDRESS PO Box 183			Transaction ID : F65-CN4537	08/10/2018	2000.00	CITY Anoka	STATE MN	ZIP CODE 55303	Occupation		
A. FULL NAME Electing Majority Making Effective Republicans PAC			Name of Employer	Date (month, day, year)	Amount																
MAILING ADDRESS PO Box 183			Transaction ID : F65-CN4537	08/10/2018	2000.00																
CITY Anoka	STATE MN	ZIP CODE 55303	Occupation																		
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td colspan="3" style="padding: 5px;"> B. FULL NAME Emmer For Congress </td> <td style="padding: 5px;"> Name of Employer </td> <td style="padding: 5px;"> Date (month, day, year) </td> <td style="padding: 5px;"> Amount </td> </tr> <tr> <td colspan="3" style="padding: 5px;"> MAILING ADDRESS PO Box 998 </td> <td style="padding: 5px;"> Transaction ID : F65-CN4536 </td> <td style="padding: 5px;"> 08/10/2018 </td> <td style="padding: 5px;"> 2000.00 </td> </tr> <tr> <td style="padding: 5px;"> CITY Anoka </td> <td style="padding: 5px;"> STATE MN </td> <td style="padding: 5px;"> ZIP CODE 55303 </td> <td colspan="3" style="padding: 5px;"> Occupation </td> </tr> </table>				B. FULL NAME Emmer For Congress			Name of Employer	Date (month, day, year)	Amount	MAILING ADDRESS PO Box 998			Transaction ID : F65-CN4536	08/10/2018	2000.00	CITY Anoka	STATE MN	ZIP CODE 55303	Occupation		
B. FULL NAME Emmer For Congress			Name of Employer	Date (month, day, year)	Amount																
MAILING ADDRESS PO Box 998			Transaction ID : F65-CN4536	08/10/2018	2000.00																
CITY Anoka	STATE MN	ZIP CODE 55303	Occupation																		
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td colspan="3" style="padding: 5px;"> C. FULL NAME Suntrust PAC </td> <td style="padding: 5px;"> Name of Employer </td> <td style="padding: 5px;"> Date (month, day, year) </td> <td style="padding: 5px;"> Amount </td> </tr> <tr> <td colspan="3" style="padding: 5px;"> MAILING ADDRESS 919 E Main St </td> <td style="padding: 5px;"> Transaction ID : F65-CN4538 </td> <td style="padding: 5px;"> 08/10/2018 </td> <td style="padding: 5px;"> 1000.00 </td> </tr> <tr> <td style="padding: 5px;"> CITY Richmond </td> <td style="padding: 5px;"> STATE VA </td> <td style="padding: 5px;"> ZIP CODE 23219 </td> <td colspan="3" style="padding: 5px;"> Occupation </td> </tr> </table>				C. FULL NAME Suntrust PAC			Name of Employer	Date (month, day, year)	Amount	MAILING ADDRESS 919 E Main St			Transaction ID : F65-CN4538	08/10/2018	1000.00	CITY Richmond	STATE VA	ZIP CODE 23219	Occupation		
C. FULL NAME Suntrust PAC			Name of Employer	Date (month, day, year)	Amount																
MAILING ADDRESS 919 E Main St			Transaction ID : F65-CN4538	08/10/2018	1000.00																
CITY Richmond	STATE VA	ZIP CODE 23219	Occupation																		
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td colspan="3" style="padding: 5px;"> D. FULL NAME Fisher, Kenneth, L., , </td> <td style="padding: 5px;"> Name of Employer Fisher Investments </td> <td style="padding: 5px;"> Date (month, day, year) </td> <td style="padding: 5px;"> Amount </td> </tr> <tr> <td colspan="3" style="padding: 5px;"> MAILING ADDRESS 5700 NW Fisher Creek Dr Suite 100 </td> <td style="padding: 5px;"> Transaction ID : F65-CN4534 </td> <td style="padding: 5px;"> 08/11/2018 </td> <td style="padding: 5px;"> 2700.00 </td> </tr> <tr> <td style="padding: 5px;"> CITY Camas </td> <td style="padding: 5px;"> STATE WA </td> <td style="padding: 5px;"> ZIP CODE 98607 </td> <td colspan="3" style="padding: 5px;"> Occupation Vice President </td> </tr> </table>				D. FULL NAME Fisher, Kenneth, L., ,			Name of Employer Fisher Investments	Date (month, day, year)	Amount	MAILING ADDRESS 5700 NW Fisher Creek Dr Suite 100			Transaction ID : F65-CN4534	08/11/2018	2700.00	CITY Camas	STATE WA	ZIP CODE 98607	Occupation Vice President		
D. FULL NAME Fisher, Kenneth, L., ,			Name of Employer Fisher Investments	Date (month, day, year)	Amount																
MAILING ADDRESS 5700 NW Fisher Creek Dr Suite 100			Transaction ID : F65-CN4534	08/11/2018	2700.00																
CITY Camas	STATE WA	ZIP CODE 98607	Occupation Vice President																		
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td colspan="3" style="padding: 5px;"> E. FULL NAME Fisher, Sherrilyn, A., , </td> <td style="padding: 5px;"> Name of Employer Self </td> <td style="padding: 5px;"> Date (month, day, year) </td> <td style="padding: 5px;"> Amount </td> </tr> <tr> <td colspan="3" style="padding: 5px;"> MAILING ADDRESS 5700 NW Fisher Creek Dr Suite 100 </td> <td style="padding: 5px;"> Transaction ID : F65-CN4535 </td> <td style="padding: 5px;"> 08/11/2018 </td> <td style="padding: 5px;"> 2700.00 </td> </tr> <tr> <td style="padding: 5px;"> CITY Camas </td> <td style="padding: 5px;"> STATE WA </td> <td style="padding: 5px;"> ZIP CODE 98607 </td> <td colspan="3" style="padding: 5px;"> Occupation Real Estate </td> </tr> </table>				E. FULL NAME Fisher, Sherrilyn, A., ,			Name of Employer Self	Date (month, day, year)	Amount	MAILING ADDRESS 5700 NW Fisher Creek Dr Suite 100			Transaction ID : F65-CN4535	08/11/2018	2700.00	CITY Camas	STATE WA	ZIP CODE 98607	Occupation Real Estate		
E. FULL NAME Fisher, Sherrilyn, A., ,			Name of Employer Self	Date (month, day, year)	Amount																
MAILING ADDRESS 5700 NW Fisher Creek Dr Suite 100			Transaction ID : F65-CN4535	08/11/2018	2700.00																
CITY Camas	STATE WA	ZIP CODE 98607	Occupation Real Estate																		
SIGNATURE (optional) Gilbert, Randy, , ,				DATE 08/11/2018																	
<i>[Electronically Filed]</i>				For further information contact: Federal Election Commission 999 E Street, NW, Washington, DC 20463 Toll Free 800-424-9530, Local 202-694-1100																	

--	--	--

Any information copied from reports and statements filed under the Federal Election Campaign Act may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes other than using the name and address of any political committee to solicit contributions from such committee.

FEC FORM 6
(Revised 03/2016)

48 HOUR NOTICE OF CONTRIBUTIONS/LOANS RECEIVED

(See Reverse Side for Instructions)

To be used to report all contributions (including loans) of \$1000 or more, received within 20 days of the election.

1. NAME OF COMMITTEE IN FULL Pete Stauber for Congress			
ADDRESS (number and street) 23 Central Entrance Box 333			
CITY, STATE, and ZIP CODE Duluth MN 55811			
2. NAME OF CANDIDATE Stauber, Peter, Allen, ,		3. OFFICE SOUGHT (State and District) House MN 08	
4. FEC IDENTIFICATION NUMBER C00650697		<i>continuation page</i>	
5. IS THIS AN AMENDMENT? <input checked="" type="checkbox"/> NO, THIS IS A NEW FILING <input type="checkbox"/> YES, IT AMENDS THE NOTICE FILED ON ____ / ____ / ____			
A. FULL NAME, MAILING ADDRESS AND ZIP CODE Skule, John, , , 23790 Jasmine Lake Dr Bonita Springs FL 34135	Name of Employer Retired Transaction ID : F65-CN4539 Occupation Retired	Date (month, day, year) 08/11/2018	Amount 1000.00
B. FULL NAME, MAILING ADDRESS AND ZIP CODE	Name of Employer Occupation	Date (month, day, year)	Amount
C. FULL NAME, MAILING ADDRESS AND ZIP CODE	Name of Employer Occupation	Date (month, day, year)	Amount
D. FULL NAME, MAILING ADDRESS AND ZIP CODE	Name of Employer Occupation	Date (month, day, year)	Amount
E. FULL NAME, MAILING ADDRESS AND ZIP CODE	Name of Employer Occupation	Date (month, day, year)	Amount